## **Referral Agencies**

## Sample

You have been ordered by the court to complete an evaluation and recommendations made by the Gray County Court Program. This program is operated by Sarasota Counseling Agency, which also provides treatment services.

Once you have been evaluated, you will be allowed at least three days to make a decision regarding which agency you want to attend for treatment, if you are referred to treatment. Below is a list of agencies and contact information, including Sarasota Counseling, which meet the state rules for a referral agency used by a court program.

You may choose any of these agencies that offer the required services without any fear that choosing one over another will cause you any problems or provide any favoritism from this court program.

You may also choose an agency that is not on this list provided it meets the state guidelines for being a referral agency and is able to provide the required treatment. (The above sentence is not required but would be appropriate based on Sec. 32(c)(2)(D).)

In Gray County	
Sarasota Counseling Agency Address Phone	Birmingham Mental Health Center Address Phone
<u>In S</u>	Surrounding Counties
Fruit and Associates Address Phone	Roundabout Counseling, Inc. Address Phone
The information provided in this for receiving a copy of this form.	rm has been explained to me and I acknowledge
Client Signature	Date
Staff Signature	 Date